

FINANCIAL AFFIDAVIT			
IN THE CASE	IN UNITED STATES	MAGISTRATE	DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)
USA	V.S.	FOR	LOCATION NUMBER
		AT	
PERSON REPRESENTED (Show your full name)		1 <input checked="" type="checkbox"/> Defendant--Adult 2 Defendant - Juvenile 3 Appellant 4 Probation Violator 5 Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other	
CHARGE/OFFENSE (describe if applicable & check <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor)		DOCKET NUMBERS	
		Magistrate	
		District Court	
		Court of Appeals	

EMPLOYMENT	Are you now	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed		
	Name and address of employer:			
	IF YES, how much do you earn per month? \$	IF NO, give month and year of last employment		
		How much did you earn per month? \$		
ASSETS	OTHER INCOME	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____		
	CASH	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No RECEIVED SOURCES		
	PROPERTY	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ _____ Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT		
		VALUE	DESCRIPTION	
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents 4	List persons you actually support and your relationship to them Adeline - son 12 years old Michael - daughter 10 years old Michael - son 8 years old Michael - daughter 4 years old
	DEBTS & MONTHLY BILLS	APARTMENT OR HOME:	Creditors	Total Debt Monthly Paymt.
		91 Jones Street	\$ 100.00	\$ 68.00
		Telephone	\$ 50.00	\$ 50.00

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

x [Signature]